
CHAPTER 9

FIRST AID AND EMERGENCY MEDICAL TREATMENT

PROVIDING FIRST AID AND/OR EMERGENCY MEDICAL TREATMENT FOR OCCUPATIONAL INJURIES AND ILLNESSES

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CHAPTER 9

FIRST AID AND EMERGENCY MEDICAL TREATMENT

PROVIDING FIRST AID AND/OR EMERGENCY MEDICAL TREATMENT FOR OCCUPATIONAL INJURIES AND ILLNESSES

9.00 INTRODUCTION

This chapter covers information about first aid and/or emergency medical treatment, transportation, emergency medical facilities, notice to employee crime victim, predesignated personal physician, first aid supplies, and first aid and CPR training.

9.01 PURPOSE

The purpose of this chapter is to ensure managers, supervisors, and employees follow specific instructions whenever first aid and/or related medical services are needed to assist an injured or ill employee.

See Chapter 10 - REPORTING PERSONAL INJURIES AND ILLNESSES for information about specific forms used to report and document occupational injuries and illnesses.

9.02 POLICY STATEMENT

Supervisors and facility/building managers are responsible to have first aid supplies readily available at each worksite to provide immediate aid to injured or ill employees, and/or to provide transportation for an injured or ill employee to a medical facility for treatment.

9.03 DEFINITION OF FIRST AID AND LIMITATIONS

Caltrans employees, including co-workers, and/or designated first aid response team members, are allowed to administer first aid to an injured or ill employee as defined in Section 2582.1 of the State Administrative Manual (SAM), which states:

“The assistance provided the sick or injured before medical help is available but only with the express purpose of controlling the loss of blood, sustaining breathing, and reducing the effects of shock. Suitably trained personnel are highly recommended. Medical diagnosis, treatment, and provision of medicines or drugs (aspirin included) are not appropriate.”

Providing first aid or medical treatment beyond “first aid” as defined in the SAM is not acceptable for Caltrans employees.

The purchase of advanced first aid supplies, trauma kits, oxygen systems, or similar medical devices is clearly beyond first aid, and contrary to Departmental policy.

Employees who engage in off-duty first aid and CPR activities, such as volunteers in community organizations, should be encouraged to use their skills in administering first aid/CPR within the SAM definition, but should not provide medical diagnosis or treatment beyond that.

9.04 MEDICAL RESPONSE AND TRANSPORTATION

Whenever an occupational injury or illness occurs the first obligation is to provide the injured or ill employee with first aid and/or other appropriate medical treatment.

The severity of an injury or illness determines whether or not the employee is cared for at the worksite or transported to a medical facility for medical treatment.

The employee may be taken to a medical facility by a supervisor or co-worker, and if necessary by an ambulance to a medical facility for professional medical treatment.

Medical services and first aid requirements are based on the following Cal-OSHA regulations:

Section 3400(b) of the General Industry Safety Orders, and Section 1512(b) of the Construction Safety Orders requires every employer to have personnel adequately trained to render first aid.

Section 3400(f) of the General Industry Safety Orders requires every employer who has employees situated in isolated locations, e. g., maintenance stations, construction field offices, or other field locations, shall have personnel adequately trained to render first aid.

At Caltrans first aid is provided by employees who volunteer their skills to render aid to an injured or ill employee, and make up Caltrans First Aid Teams at District Offices, Service Centers, or they are employees assigned to “field work” and are trained in first aid and CPR based on the Cal-OSHA regulations cited above.

In addition to the information presented here, procedures for calling for first aid, arranging for medical treatment, and/or emergency transportation to a medical facility are described in Emergency Action Plans and may differ between offices locations and remote field locations.

NOTE:

See Section 9.07 for conditions and restrictions regarding the use of an employee's predesignated personal physician for occupational injury or illness.

See Section 9.11 and 9.12 for information regarding training requirements for first aid and CPR.

See Chapter 8 - GENERAL HEALTH, MEDICAL, AND SAFETY, Section 8.06 for information covering Emergency Action Plans.

Medical response, medical treatment, and transportation is provided as follows:

- **First Aid**

First aid is limited to providing immediate medical aid, by a supervisor or co-worker, or by a First Aid Team.

First aid care is the assistance provided to an injured or ill employee by a supervisor, co-worker, or First Aid Team member, but only with the express purpose of controlling the loss of blood, sustaining breathing, and reducing the effects of shock.

Therefore, whenever an employee is injured or becomes ill the first person on-the-scene must assess the employee's physical condition and appearance, and the circumstances surrounding the accident/incident, and call for and/or offer first aid.

If the first person on-the-scene is unsure of what to do or unsure about what appropriate care is needed, he/she should ask for assistance, call or arrange for someone to call the Building Manager as described in your local Emergency Action Plan.

The Building Manager will alert the First Aid Team of the location of the accident. The First Aid Team will respond and provide medical care.

- **Professional medical treatment, NON-EMERGENCY**

Professional medical treatment, non-emergency, is when the severity of the injury or illness indicates that medical treatment beyond first aid is indicated, and the injury or illness is not life-threatening.

The first person on-the-scene must assess the employee's physical condition and appearance, and review the circumstances surrounding the accident/incident, and offer first aid, or call for first aid or other appropriate medical treatment.

If the first person on-the-scene is unsure of what to do or unsure about what appropriate care is needed, he/she should ask for assistance, call or arrange for someone to call the Building Manager as described in your local Emergency Action Plan.

The Building Manager will alert the First Aid Team of the location of the accident. The First Aid Team will respond and provide medical care.

If it is determined that the injured or ill employee must be taken to a medical facility for medical treatment, the following actions shall be taken:

- The supervisor, in cooperation with the First Aid Team recommendation, shall arrange for transportation.

[The method of transportation (state or private vehicle) to the medical facility shall be made by the supervisor in cooperation with the first aid team, or other appropriate person(s)]

- The supervisor or designee shall always accompany the injured or ill employee to the medical facility.
- The supervisor or designee shall advise the medical facility staff (doctor or nurse) if the injury or illness is work-related.
- The supervisor or designee shall take a Form PM-S-0037, MEDICAL TREATMENT AUTHORIZATION to the medical clinic or hospital.

The MEDICAL TREATMENT AUTHORIZATION, Form PM-S-0037, represents a financial authorization from Caltrans, and the State Compensation Insurance Fund (SCIF), to provide medical treatment to the employee, WITH AN OCCUPATIONAL INJURY OR ILLNESS, and ensures that payment for services by the medical provider will be paid by Caltrans through SCIF. A sample of the MEDICAL TREATMENT AUTHORIZATION form is included in Chapter 10 - REPORTING PERSONAL INJURIES AND ILLNESSES.

- **Professional Medical treatment, EMERGENCY with emergency transportation**

Professional medical treatment, EMERGENCY, means the severity of the injury or illness is serious and/or may be life-threatening.

The first person on-the-scene must assess the employee's physical condition and appearance, and review the circumstances surrounding the accident/incident, administer first aid, and/or call for appropriate medical treatment.

If the first person on-the-scene is unsure of what to do or unsure about what appropriate care is needed, ask for assistance, call or arrange for someone to call the Building Manager as described in your local Emergency Action Plan.

The Building Manager will alert the First Aid Team of the location of the incident. The First Aid Team will respond, provide medical care, and assist in the decision to call for professional medical treatment and transportation.

If it is determined that the injured or ill employee must be taken to a medical facility for emergency professional medical treatment, the supervisor and the First Aid Team members shall use discretion, and if deemed appropriate, call an ambulance.

As conditions indicate, the supervisor, or First Aid Team shall cooperate with the decisions made by emergency medical personnel, law enforcement personnel, or other medical authority regarding treatment and/or transportation.

When the employee is taken to a medical facility for professional medical care, the following actions shall be taken:

- The supervisor or designee shall always go to the medical facility.
- The supervisor or designee shall advise the medical facility staff (doctor or nurse) if the injury or illness is work-related.
- The supervisor or designee shall take a Form PM-S-0037, MEDICAL TREATMENT AUTHORIZATION to the medical clinic or hospital, as discussed above.

- **Calling 9-1-1**

Most State telephone services require dialing **9 + 9-1-1** to connect with an emergency service provider.

When calling for emergency assistance, **DO NOT HANG UP**, let the emergency provider end the conversation.

When requesting emergency aid or reporting an emergency situation by dialing **9 + 9-1-1**, your telephone number and address may be automatically displayed on a viewing screen of the emergency provider. This information enables the emergency agency to quickly locate you if the call is interrupted.

9.05 MEDICAL FACILITIES (State approved clinics)

- **Posting Form STD. 621 “NOTICE TO STATE EMPLOYEES”**

To ensure that an injured or ill employee receives all necessary and reasonable medical treatment Caltrans management has secured the services of medical clinics, physicians, or hospitals in the vicinity of all Caltrans offices throughout the State.

The location of approved medical facilities are usually listed on Form STD. 621, NOTICE TO STATE EMPLOYEES, as required by the State Administrative Manual (SAM), Section 2582 which states:

“Each agency must post a complete NOTICE TO STATE EMPLOYEES, STD. Form 621, at state offices and places of state work.”

Building managers are responsible to post a completed copy of the form in conspicuous places at each Caltrans worksite. At a minimum, they shall be posted on designated safety and health bulletin boards, or other appropriate locations.

Copies of the Form STD 621 can be obtained from District or Headquarters Safety and Health Offices, and/or can be ordered through District or Service Center Warehouses.

A copy of Form STD 621 is shown at the end of this chapter. A sample map showing the location of medical clinics is also shown at the end of this chapter.

9.06 WHOM TO NOTIFY IN CASE OF AN EMERGENCY

- **How to use Form ADM - 0131
EMERGENCY NOTIFICATION INFORMATION**

The “Emergency Notification Information” form is a multi-purpose document designed to display specific information for emergency purposes. The form has been divided into five (5) sections as follows:

NAME OF EMPLOYEE: provides space for the employee's name, classification, home address, telephone number, and other employment information.

PERSON TO NOTIFY IN CASE OF AN EMERGENCY: provides space for the name, address, relationship, and telephone number of a person(s) to be notified in case of an emergency.

Employees are responsible to inform their supervisor of any changes in choice of the person to be notified so the information in the supervisor's file is accurate and current.

NAME OF PREDESIGNATED PERSONAL PHYSICIAN - FOR OCCUPATIONAL INJURY OR ILLNESS: provides space for name and address of a predesignation of a personal physician.

See Section 9.07 EMPLOYEE'S CHOICE OF PERSONAL PHYSICIAN below for more details.

EMPLOYEE NEEDS SPECIAL ASSISTANCE DURING AN EMERGENCY: provides space for a “YES” or “NO” answer only if the employees may need special assistance during an emergency evacuation.

The form shall not state the reason for the assistance. The request for assistance and the disclosure of any specific medical or personal information is purely voluntary and shall remain confidential.

Employees with permanent or temporary disabilities often have special needs during emergencies. This information must be made available to supervisory and emergency personnel before an emergency arises.

See Chapter 8 - GENERAL HEALTH, MEDICAL AND SAFETY, Section 8.07 EMERGENCY ACTION PLAN AND EVACUATION REQUIREMENTS SPECIFICALLY COVERING THE AMERICANS WITH DISABILITIES ACT (ADA), Sub-section - Identifying Persons with Special Needs and/or Disabilities. for details about special assistance during emergencies.

ADDITIONAL INFORMATION: provides space for any additional information which an employee may wish to volunteer, or comments by the supervisor.

* * * *

Employee is personally responsible for providing information to his/her supervisor and updating that information when names or conditions change.

Supervisors shall maintain a copy of the EMERGENCY NOTIFICATION INFORMATION form for each employee at the worksite.

An additional copy shall be filed in the employee's official personnel folder in the Office of Personnel Operations, Personnel Transactions Branch, Northern and Southern Service Centers, and/or other appropriate location to satisfy local needs.

A sample of an EMERGENCY NOTIFICATION INFORMATION, Form ADM-0131 is shown at the end of this chapter.

9.07 NOTICE TO EMPLOYEE CRIME VICTIMS

- **Eligibility for workers' compensation for employee(s) who is(are) victim(s) of a crime that occurred at place of employment**

§ 3553. Labor Code "Notice to Crime Victims," states:

Every employer subject to the compensation provisions of this code shall give any employee who is a victim of a crime that occurred at the employee's place of employment written notice that the employee is eligible for workers' compensation for injuries, including psychiatric injuries, that may have resulted from the place of employment crime. The employer shall provide this notice, either personally or by first-class mail, within one working day of the place of employment crime, or within one working day of the date the employer reasonably should have known of the crime.
Leg. H 1997 ch 527.

Supervisors, with the assistance of the District or Headquarters Safety and Health Offices, and the Workers' Compensation Case Managers shall ensure that affected employee(s) is(are) notified about this policy.

As a general rule, notification about eligibility for workers' compensation for injuries, including psychiatric injuries, should be given to: 1) injured employee(s), 2) an employee(s) directly involved, but uninjured, and 3) employee(s) at the worksite.

NOTE:

See Chapter 6 - WORKPLACE VIOLENCE for details about Departmental policies, procedures, and strategies for maintaining a zero tolerance for violence in the workplace.

See Chapter 19 - SPECIAL REPORTING OF SERIOUS INJURY, ILLNESS, OR FATALITY for details about reporting procedures.

9.08 EMPLOYEE'S CHOICE OF PERSONAL PHYSICIAN

The California Labor Code, Section 3552. Providing "personnel physician" states:

"Upon the request of an employee, an employer shall provide the employee with an appropriate form on which the employee may indicate the name of his or her "personal physician," as defined in Section 4600."

Section 4600. Medical treatment provided by employer; expenses included, states in part:

"Medical, surgical, chiropractic, and hospital treatment, including nursing, medicines, medical and surgical supplies, that is reasonably required to cure or relieve the effects of the injury shall be provided by the employer."

Further, Section 4600 defines personal physician as:

"For the purpose of this section, "personal physician" means the employee's regular physician and surgeon, licensed pursuant to . . . Business and Professional Code, who has previously directed the medical treatment of the employee, and who retains the employee's medical records, including his or her medical history."

The California Code of Regulations, Title 8, Industrial Relations, Chapter 4.5, Division of Workers' Compensation, Section 9780.2. Employer Duty to Provide First Aid and Emergency Treatment, states in part:

“Where an employee has notified his or her employer in writing prior to the date of injury that he or she wishes to be treated by a personal physician pursuant to Labor Code 4600, the employer shall continue to have the duty to provide first aid treatment, and appropriate emergency treatment reasonably required by the nature of the injury or illness. Thereafter, if further medical treatment is reasonably necessary, the employee may be treated by his or her personal physician at the expense of the employer.”

Therefore, whenever an employee is injured or becomes ill while on the job, and it has been determined that first aid treatment, and appropriate emergency treatment is required, the supervisor's first duty and obligation is to provide for prompt transportation to the nearest approved medical facility.

Conditions and restrictions regarding the use of an employee's personal physician for occupational injury or illness are as follows:

An employee's choice of predesignated personal physician may be used for **non-emergency** medical care for occupational injury and illness, and if **geographic conditions** allow for transportation to the predesignated personal physician's office:

Non-emergency means that the employee's injury or illness is not life-threatening; and,

Geographic conditions means that the physicians office is located within a reasonable distance from the place of injury or illness, and a Caltrans approved medical facility is not closer than the physician's office.

The employee's predesignated personal physician may be used under the following conditions:

1. If medical and/or geographical circumstances permit, and; the injury or illness is considered a non-emergency, and; the employee has a request to use his/her personal physician on file, the employee's personal physician may be utilized.
2. For non-emergency medical care, if; before taking the employee to his/her personal physician, the employee can confirm that his/her physician will accept walk-in treatment.
3. If the employee's personal physician will not accept the employee for walk-in treatment at the time it is needed, the supervisor shall take the employee to the nearest approved medical facility for appropriate medical care.

Use Form ADM-0131 EMERGENCY NOTIFICATION INFORMATION for predesignating a personal physician for occupational injury or illness.

9.09 REQUIREMENTS FOR FIRST AID MEDICAL SUPPLIES

- **Minimum Requirements**

Section 2582.1 of the State Administrative Manual (SAM) and Section 3400 of the General Industry Safety Orders (GISO) require every State department to provide and have readily available first aid kits and appropriate medical supplies for injured or ill employees.

These regulations also require that first aid kits and supplies shall be kept in sanitary and usable condition, inspected frequently, and supplies replenished as they are used.

- **Supervisor's Responsibilities**

Supervisor's are responsible to ensure that first aid kits and appropriate medical supplies are readily available, and in sufficient quantity, for injured or ill employees at all worksites within their area of responsibility.

For example, separate first aid kits may have to be ordered to accommodate work groups that may be physically separated by wall partitions, hallways, different floors within multi-floor buildings, or other physical barriers.

Supervisors shall inform their employees of the location of first aid kits in the work area and adjacent work areas. Supervisors may post signs showing the location of first aid kits.

Supervisors may order several first aid kits of different sizes to accommodate the needs of their employees.

Supervisors shall conduct, or assign a person to conduct, routine inspections of first aid supplies at each worksite, office, or facility to replenish supplies.

- **Building Manager's and Facilities Operations Responsibilities**

Building Manager's and/or Facilities Operations personnel are responsible to ensure that all Caltrans facilities, including rented or leased facilities, are supplied with an adequate number of first aid kits and appropriate medical supplies in areas not specifically covered by individual supervisors, as described above.

If building owners/rental agents, do not provide adequate first aid kits and medical supplies, through lease or rental agreements, necessary to comply with the SAM or Cal/OSHA requirements, Caltrans Building Managers and/or Facilities Operations personnel shall take the necessary steps to ensure first aid materials are readily available.

Building Managers should post signs showing the location of first aid kits and other supplies as may be deemed appropriate.

Building Managers shall conduct, or assign a person to conduct, routine inspections of first aid supplies at each worksite, office, or facility under their jurisdiction to replenish used supplies.

- **Special Request/Location for First Aid Kit/Supplies**

Building Manager's and/or Facilities Operations personnel should give special consideration for additional first aid supplies in leased buildings where local codes or lease agreements may not require first aid supplies in common work areas; i.e., employee lounge, restrooms, and kitchen areas where coffee machines and food preparation is handled. This is particularly important in new or remodeled buildings equipped with modular furniture where one (1) centrally located kitchen area services the needs of an entire floor of a building.

- **Medical Approvals for Exceptions to First Aid Supplies**

Section 3400(c) of the General Industry Safety Orders allows State departments to order first aid and medical supplies, that are not normally used, provided they are approved by a consulting physician.

Therefore, if managers and/or supervisors determine that a special first aid item, not included on the approved list, would best fit their particular work activity, they may request an exception to the approved list.

The Chief, Office of Safety and Health (Headquarters), in cooperation with the State Medical Officer, must approve all exceptions for first aid supplies. Managers and supervisors should not independently procure or order first aid supplies without first obtaining the necessary approvals.

In order to be granted an exception, managers and/or supervisors should contact the District or Headquarters Safety and Health Office for assistance as follows:

- The District Safety and Health staff is available to discuss alternative first aid items with District personnel. The Headquarters Safety staff is available for questions in the Sacramento area.
- The District Safety and Health Officer should contact the Headquarters Safety Office, which will review, and forward all requests for exceptions to the State Medical Officer. The Headquarters Safety Office will notify the requesting district of the medical officer's decision.
- Supervisors are encouraged to solicit information from the safety staff about products that may make his/her work safer, and reduce the potential for injury or illness.

9.10 LOCATION OF FIRST AID KITS

The following is the suggested minimum distribution and size of first aid kits to ensure that all employees have easy access to first aid supplies. There are no restrictions to the number of first aid kits available at each facility. An adequate number of first aid kits shall be located at every Caltrans facility to accommodate the needs of employees. Supervisors and building managers are responsible to determine the number of first aid kits required to satisfy their needs.

First aid kits shall be available at each worksite and in vehicles as indicated below:

<u>KIT SIZE</u>	<u>RECOMMENDED LOCATION OF FIRST AID KITS</u>
5 Unit Kit -	For personal use, may be carried by employees.
10 Unit Kit -	At each construction crew field worksite. At each maintenance crew field worksite. In each maintenance crew vehicle. At each landscape crew field worksite. In each resident mechanic vehicle. Held by each certified first aid responder.
16 Unit Kit -	In each survey crew vehicle. At each survey field office.
24 Unit Kit -	At each construction field office. At each Equipment Shop. At each maintenance station. Any other office work setting deemed appropriate.
36 Unit Kit -	At various locations within each District Office building or satellite office building, the Caltrans Headquarters office building, Service Centers, and satellite offices. At various locations within each Caltrans rented or leased building.

New or replacement supplies can be ordered through the Caltrans Purchasing and Warehousing Catalog.

9.11 CONTENTS OF FIRST AID KITS

ITEM	5 - UNIT	10 - UNIT	16 - UNIT	24 - UNIT	36 - UNIT
1" BANDAGE	1	1	2	3	4
4" BANDAGE "ACE"	-	-	1	1	2
GAUZE BANDAGE 2" X 6 YDS	-	1	-	2	4
GAUZE COMPRESS 3" X 3"	1	1	2	2	4
SELF-ADHERING GAUZE 1" X 7 1/2 YDS	1	1	1	2	3
ADHESIVE TAPE 2 ROLLS 1/2" X 2 1/2 YDS	-	1	2	2	3
EYE DRESSING PADS	-	1	1	1	2
TRIANGULAR BANDAGE 40 "	1	1	1	1	2
WIRE SPLINT	-	-	1	1	2
ANTISEPTIC SWAB	1	1	3	3	4
SCISSORS AND FORCEPS-	-	1	1	1	1
VINYL GLOVES	2	4	4	4	4

ADDITIONAL ITEMS AVAILABLE

TOILET SOAP 1 OZ (BAR SOAP)	2	4	4	4	4
TOILET SOAP 2 OZ (BAR SOAP) (ALTERNATE SIZE)	2	4	4	4	4
POISON IVY/OAK WASH (AVAILABLE UPON REQUEST)					
ADHESIVE TAPE (WATERPROOF)	1	1	2	2	3
INSTANT COLD PACK	-	-	1	-	-
TOWLETTE PREPS	2	4	4	4	4
FIRST AID MANUAL	1	1	1	1	1

FIRST AID KIT	5 - UNIT
CONTAINER LABELS	10 - UNIT
	16 - UNIT
	24 - UNIT
	36 - UNIT

PROTECTIVE MOUTH BARRIER*

* Providing mouth barriers is only recommended for employees trained in performing CPR.

Refer to the Caltrans Warehouse Inventory list for stock item numbers to order supplies. If the contents of a first aid kit do not fit local needs, additional items can be obtained by ordering a larger kit, or by adding single items to the existing kit.

First aid kits should be inspected monthly.

9.12 FIRST AID AND CARDIO PULMONARY RESUSCITATION (CPR) TRAINING

The following work groups (**see footnote**) shall be trained in First Aid during the first three (3) months of their assignment, and at least once every three (3) years thereafter:

- **Field personnel in: Highway/Landscape Maintenance, Tree Work, Electrical, Construction, Surveys, Foundation Drillers, Structures Construction and Maintenance, or similar field assignments.**
- **Traveling Mechanics and Preventive Maintenance (P.M.) Mechanics**
- **Volunteer members of the Emergency First Aid Response Teams**

The following work groups (**see footnote**) shall be trained in CPR during the first month of their assignment, and at least once a year thereafter:

- **Tree Maintenance Work (and related classifications)**
- **Electrical Work (and related classifications)**
- **Foundation Drillers**
- **Volunteer members of the Emergency First Aid Response Teams**

With supervisory approval, any employee(s) or work group(s) whose duties may require knowledge and use of First Aid and/or CPR techniques may receive training.

* * * * *

First Aid and Cardio Pulmonary Resuscitation (CPR) training shall be consistent with and equivalent to that of the standards and guidelines provided by the American Red Cross, and/or the American Heart Association based on current medical standards.

The instructor shall provide a certificate of completion for each participant. The certificate shall show the employee's name and date of training, or expiration date of the training. Supervisors and employees are responsible to complete training request forms.

Funding for training is allocated from each District or Program Manager operating expense budget. Allocation of funds must be determined by each manager and/or supervisor in cooperation with his/her budget coordinator.

Footnotes: 1. Cal-OSHA Construction Safety Orders, Section 1512(b), and the General Industry Safety Orders, Section 3400(b) requires the above listed work groups to be properly trained to render first aid. General Industry Safety Orders, Section 3421(j) requires employees engaged in tree maintenance work to be provided training in first aid and cardio pulmonary resuscitation (CPR).

2. The American Red Cross standard is to provide First Aid training every three (3) years. The American Heart Association standard is to provide CPR training to non-professional personnel every one (1) year.

9.13 MOUTH BARRIERS (CPR MASK)

Mouth barriers; i. e., microshield clear mouth barrier, mask with one-way valves, or similar devices should be made available to employees trained in administering CPR (Cardio-Pulmonary Resuscitation).

NOTE:

See Chapter 8 - HEALTH, MEDICAL, AND SAFETY, Section 8.08, COMMUNICABLE DISEASE PROTECTION, Protection Kits, regarding mouth barrier size and storage.

* * * * *

FIRST AID AND EMERGENCY MEDICAL TREATMENT

JULY 1996

9-20

EMERGENCY NOTIFICATION INFORMATION

FORM ADM - 0131

STATE OF CALIFORNIA § DEPARTMENT OF TRANSPORTATION
EMERGENCY NOTIFICATION INFORMATION
 ADM-0131 (REV. 1/97) CT #7541-1514-5

PERSONAL INFORMATION NOTICE

Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code Sections 1798, et seq.), notice is hereby given for the request of personal information by this form. The requested personal information is voluntary. The principal purpose of the voluntary information is to facilitate the processing of this form. The failure to provide all or any part of the requested information may delay processing of this form. No disclosure of personal information will be made unless permissible under Article 6, Section 1798.24 of the IPA of 1977. Each individual has the right upon request and proper identification to inspect all personal information in any record maintained on the individual by identifying particular. Direct any inquiries on information maintenance to your IPA Officer.

		DATE
EMPLOYEE NAME	OFFICE PHONE NUMBER	HOME PHONE NUMBER
HOME STREET ADDRESS	CITY, STATE, ZIP CODE	
POSITION NUMBER	DISTRICT/DIVISION	SOCIAL SECURITY NUMBER
SUPERVISOR	OFFICE PHONE NUMBER	

PERSONS TO NOTIFY IN CASE OF EMERGENCY

1	NAME	RELATIONSHIP
	HOME STREET ADDRESS	HOME PHONE NUMBER
	CITY, STATE, ZIP CODE	BUSINESS PHONE NUMBER
2	NAME	RELATIONSHIP
	HOME STREET ADDRESS	HOME PHONE NUMBER
	CITY, STATE, ZIP CODE	BUSINESS PHONE NUMBER

PREDESIGNATING YOUR PHYSICIAN FOR AN OCCUPATIONAL INJURY/ILLNESS

PHYSICIAN'S NAME	BUSINESS PHONE NUMBER
OFFICE ADDRESS (Include city, state and Zip code)	
MEDICAL INSURANCE COMPANY	MEDICAL CARD NUMBER (If applicable)

SPECIAL ASSISTANCE IN AN EMERGENCY

Does employee need special assistance during an emergency? ☐ YES ☐ NO
 If yes, discuss with employee and notify emergency response personnel.

ADDITIONAL MEDICAL INFORMATION

RETURN TO: Department of Transportation
 Personnel Transactions MS-47
 1727 - 30th Street, 5th Floor
 Sacramento, CA 95816

ORIGINAL - Official Personnel File
 YELLOW - Supervisor
 PINK - Liaison
 GOLDENROD - Timekeeper/RAO

NOTICE TO STATE EMPLOYEES

FORM STD. 621

POST IN A CONSPICUOUS PLACE

NOTICE TO STATE EMPLOYEES



1. **IT IS STATE POLICY** to provide all necessary and reasonable medical treatment for employee injuries or illnesses caused by and/or sustained in the course of State employment.
2. **ALWAYS IMMEDIATELY NOTIFY YOUR SUPERVISOR OF ANY WORK-RELATED INJURY OR ILLNESS.** Your employer will provide you with a notice of potential eligibility for benefits and a claim form on which you must describe the circumstances of the injury. The form should be completed and returned to your supervisor as soon as possible to protect your benefits.

Any person who makes or causes to be made any knowingly false or fraudulent material statement or material representation for the purpose of obtaining or denying workers' compensation benefits or payments is guilty of a felony.

3. **SUPERVISORS**, or other trained personnel, shall insure that appropriate first aid is provided. Supervisors, if necessary, shall arrange for prompt treatment from an authorized physician or medical facility.
4. **FIRST AID SUPPLIES** are located in/at:

SERVICE	NAME	ADDRESS	PHONE NO.
AUTHORIZED MEDICAL PROVIDERS:	Med Clinic	3160 Folsom Blvd., Sacramento	733-3390
	Sutter Occupational Health Services	1201 Alhambra Blvd., Suite 210	731-7725
PARAMEDICS:		9-911 and	654-5028
AMBULANCE SERVICES:		9-911 and	654-5028
OTHER:	XXXXXX CHP	9-911 and	654-5028
	Local Police and Fire ...	9-	9-1-1
	Poison Control Center ...	(1-800-876-4766)	734-3692

5. **EMPLOYEES** may be treated by their designated personal physician following a work-related injury or illness. For this, a physician designation form must be completed and on file with the employer prior to the injury or illness.
6. **SUPERVISORS** must complete the Supervisor's Review Section on the reverse side of State Fund Form 3067 Employers Report of Injury or Occupational Illness or approved equivalent following all work-related injuries or illnesses.
7. **COMPENSATION PAYMENTS** will be made in accordance with State Law and, if applicable, your choice of available benefit options.
8. **VOCATIONAL REHABILITATION** benefits and services will be provided to qualified employees if their work-related injuries or illnesses prevent them from returning to their regular assignment.
9. **DEATH BENEFITS** will be paid to qualified dependents as provided by law.
10. **STATE COMPENSATION INSURANCE FUND**, as either adjusting agent or insurance carrier, adjusts all State employee workers' compensation claims. For further information call:

NAME	PHONE NO. (CALNET IF APPLICABLE)
State Compensation Insurance Fund	(916) 567-7500

OR

Information and Assistance Officer, Division of Workers' Compensation	
CITY	PHONE NO. (CALNET IF APPLICABLE)
Sacramento	(916) 263-2741

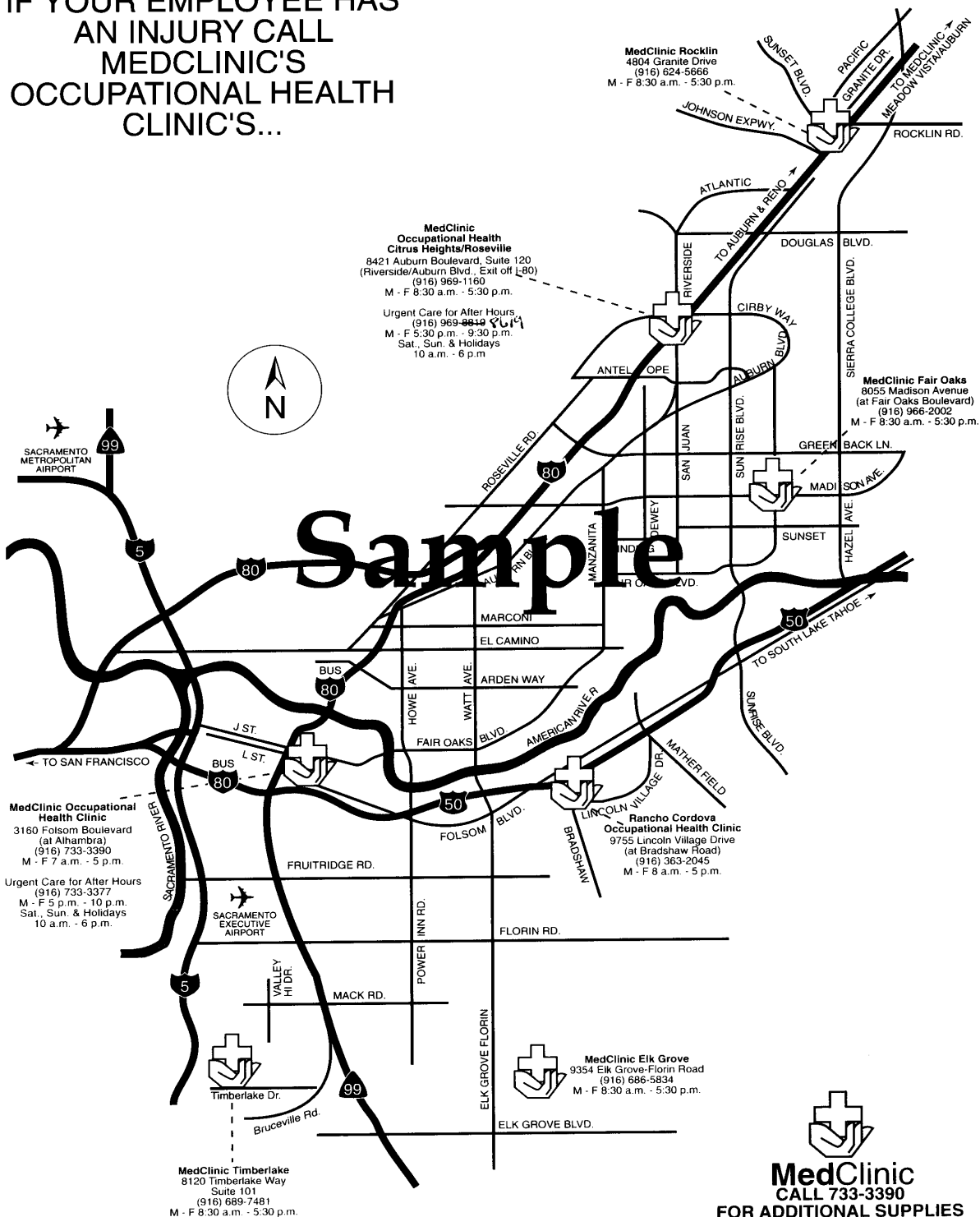
11. **OFF-DUTY RECREATIONAL, SOCIAL, OR ATHLETIC ACTIVITY:** Your agency, or the insurance carrier may not be liable for the payment of workers' compensation benefits for any injury which arises out of an employee's voluntary participation in any off-duty recreational, social, or athletic activity which is not part of the employee's work-related duties.

12. This form was prepared by:

NAME	DATE	PHONE NO. (CALNET IF APPLICABLE)
Office of Safety and Health	5/20/98	(916) 227-2640

SAMPLE MAP SHOWING MEDICAL CLINICS

IF YOUR EMPLOYEE HAS
AN INJURY CALL
MEDCLINIC'S
OCCUPATIONAL HEALTH
CLINIC'S...



January 2000